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**FACSIMILE COVER SHEET**

February 3, 2006

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FEB 03 2006

**Receiver:** Examiner Xuan Thai  
Group Art Unit 3713

**FAX #:** 571-273-8300

**Sender:** David P. Olynick

**Our Ref. No.:** IGT1P267/P-577 (formerly 29757/P-577)  
**Application No.:** 09/964,962

**Re:** RCE & Response to Final Office Action of April 26, 2004

**Pages Including Cover Sheet(s):** 23

**MESSAGE:**

Please see attached.

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**CONFIDENTIALITY NOTE**

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FEB 03 2006

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Paulsen et al.

Attorney Docket No.: IGT1P267/P-577  
(formerly 29757/P-577)

Application No.: 09/964,962

Examiner: Xuan Thai

Filed: September 27, 2001

Group: 3713

Title: GAMING MACHINE REEL HAVING A  
FLEXIBLE DYNAMIC DISPLAY

Confirmation No.: 2536

**CERTIFICATE OF FACSIMILE TRANSMISSION**I hereby certify that this correspondence is being transmitted by  
facsimile to fax number 571-273-8300 of the U.S. Patent and  
Trademark Office on February 3, 2006.Signed: 

Cherice R. Brown

**AMENDMENT TRANSMITTAL**Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

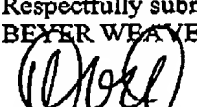
Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	60	MINUS	18	42	x 25 =	x 50 = \$2100
Independent Claims	04	MINUS	03	01	x 100 =	x 200 = \$200
Multiple Dependent Claim Present and Fee Not Previously Paid						
Total					\$	\$2300.00

- ☐ Applicant(s) hereby petition for a \_\_\_\_\_ month extension(s) of time to respond to the  
aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is  
determined that such an extension is required, Applicant(s) hereby petition that such an extension  
be granted and authorize the Commissioner to charge the required fees for an Extension of Time  
under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. \_\_\_\_\_ in the amount of \$\_\_\_\_\_ to cover the additional  
claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the  
enclosed response, to Deposit Account No. 500388 (Order No. IGT1P267).

Respectfully submitted,  
BEYER WEAVER & THOMAS, LLP  
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